

County: Sheboygan  
PINE HAVEN CHRISTIAN HOME, INC.  
531 GIDDINGS AVENUE

Facility ID: 7200

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SHEBOYGAN FALLS 53085 Phone: (920) 467-2401  
Operated from 1/1 To 12/31 Days of Operation: 365  
Operate in Conjunction with Hospital? No  
Number of Beds Set Up and Staffed (12/31/03): 71  
Total Licensed Bed Capacity (12/31/03): 71  
Number of Residents on 12/31/03: 69

Ownership: Nonprofit Church/Corporation  
Highest Level License: Skilled  
Operate in Conjunction with CBRF? Yes  
Title 18 (Medicare) Certified? No  
Title 19 (Medicaid) Certified? Yes  
Average Daily Census: 68

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/03)				Length of Stay (12/31/03)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		23.2
Supp. Home Care-Personal Care	No					1 - 4 Years		39.1
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	1.4	More Than 4 Years		24.6
Day Services	No	Mental Illness (Org./Psy)	26.1	65 - 74	1.4			----
Respite Care	No	Mental Illness (Other)	4.3	75 - 84	26.1			87.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	58.0	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	2.9	95 & Over	13.0	Full-Time Equivalent		
Congregate Meals	No	Cancer	2.9		----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/03)		
Other Meals	No	Cardiovascular	24.6	65 & Over	98.6	-----		
Transportation	No	Cerebrovascular	5.8		-----	RNs		8.9
Referral Service	No	Diabetes	7.2	Gender	%	LPNs		10.4
Other Services	No	Respiratory	2.9		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	23.2	Male	17.4	Aides, & Orderlies		
Mentally Ill	No		----	Female	82.6			
Provide Day Programming for			100.0		----			
Developmentally Disabled	No				100.0			

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#### Method of Reimbursement

		Medicare (Title 18)		Medicaid (Title 19)		Other		Private Pay		Family Care		Managed Care						Total Resi- dents	% Of All
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%		
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Skilled Care	0	0.0	0	44	95.7	113	0	0.0	0	19	82.6	173	0	0.0	0	0	0.0	63	91.3
Intermediate	---	---	---	2	4.3	93	0	0.0	0	4	17.4	149	0	0.0	0	0	0.0	6	8.7
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Total	0	0.0		46	100.0		0	0.0		23	100.0		0	0.0		0	0.0	69	100.0

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/03				
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Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total Number of
		Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Residents
Private Home/No Home Health	14.9	Bathing	0.0	63.8	36.2	69
Private Home/With Home Health	8.5	Dressing	13.0	43.5	43.5	69
Other Nursing Homes	17.0	Transferring	23.2	53.6	23.2	69
Acute Care Hospitals	31.9	Toilet Use	18.8	55.1	26.1	69
Psych. Hosp.-MR/DD Facilities	2.1	Eating	65.2	24.6	10.1	69
Rehabilitation Hospitals	0.0	*****				
Other Locations	25.5					
Total Number of Admissions		Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	0.0	Receiving Respiratory Care		7.2
Private Home/No Home Health	2.1	Occ/Freq. Incontinent of Bladder	55.1	Receiving Tracheostomy Care		1.4
Private Home/With Home Health	0.0	Occ/Freq. Incontinent of Bowel	20.3	Receiving Suctioning		1.4
Other Nursing Homes	2.1			Receiving Ostomy Care		1.4
Acute Care Hospitals	4.2	Mobility		Receiving Tube Feeding		2.9
Psych. Hosp.-MR/DD Facilities	4.2	Physically Restrained	1.4	Receiving Mechanically Altered Diets		37.7
Rehabilitation Hospitals	0.0			Other Resident Characteristics		
Other Locations	6.3	Skin Care		Have Advance Directives		97.1
Deaths	81.3	With Pressure Sores	17.4	Medications		
Total Number of Discharges		With Rashes	10.1	Receiving Psychoactive Drugs		56.5
(Including Deaths)	48					

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Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

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	This Facility %	Ownership: Nonprofit Peer Group %	Ratio	Bed Size: 50-99 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	95.8	92.0	1.04	87.1	1.10	88.1	1.09	87.4	1.10
Current Residents from In-County	92.8	85.9	1.08	81.0	1.15	82.1	1.13	76.7	1.21
Admissions from In-County, Still Residing	46.8	22.1	2.12	19.8	2.37	20.1	2.33	19.6	2.38
Admissions/Average Daily Census	69.1	138.9	0.50	158.0	0.44	155.7	0.44	141.3	0.49
Discharges/Average Daily Census	70.6	139.5	0.51	157.4	0.45	155.1	0.46	142.5	0.50
Discharges To Private Residence/Average Daily Census	1.5	64.3	0.02	74.2	0.02	68.7	0.02	61.6	0.02
Residents Receiving Skilled Care	91.3	96.1	0.95	94.6	0.97	94.0	0.97	88.1	1.04
Residents Aged 65 and Older	98.6	96.4	1.02	94.7	1.04	92.0	1.07	87.8	1.12
Title 19 (Medicaid) Funded Residents	66.7	55.4	1.20	57.2	1.17	61.7	1.08	65.9	1.01
Private Pay Funded Residents	33.3	32.6	1.02	28.5	1.17	23.7	1.41	21.0	1.59
Developmentally Disabled Residents	0.0	0.6	0.00	1.3	0.00	1.1	0.00	6.5	0.00
Mentally Ill Residents	30.4	36.2	0.84	33.8	0.90	35.8	0.85	33.6	0.91
General Medical Service Residents	23.2	24.3	0.95	21.6	1.08	23.1	1.00	20.6	1.13
Impaired ADL (Mean)	52.2	50.5	1.03	48.5	1.08	49.5	1.05	49.4	1.06
Psychological Problems	56.5	58.5	0.97	57.1	0.99	58.2	0.97	57.4	0.99
Nursing Care Required (Mean)	10.0	6.8	1.46	6.7	1.48	6.9	1.44	7.3	1.36